Form **8872**(November 2002)
Department of the Treasury

Political Organization Report of Contributions and Expenditures

OMB No 1545-1696

► See Seperate instructions

nterna	al Revenue Servir e		Seperate instruction	<u> </u>		
Α	For the period beginning	APRIL 1,	,20 13	and ending	JUNE 30	, 20 13
D	Chack applicable boxes	✓ Intial report [Change of address	. Amendè	d roport [Finàl report ' "
<u>В</u>	Check applicable boxes Name of organization	initial report	Change of address			
		-000			1	entification number
	NWORKERS LOCAL UNION		or acute accepted		91 206	4183
2	Mailing address (P.O. Box or nu	_	or suite number)			
200	EAST LANDSTREET ROAD					
	City or town, state, and ZIP coc	e 				
	LANDO, FL. 32824				·	
3	E-mail address of organization				4 Date orga	anization was formed
5a	Name of custodian of records		5b Custodian's address			
			200 E. LANDSTR	EET ROAD		
BEI	NJAMIN SCHMITZ			• • • • • • • • • • • • • • • • • • • •	~	
			ORLANDO, FL. 3		REGI	
6a	Name of contact person	6	6b Contact person's ad	dress	I TO ECE	IVED
			200 E. LANDSTR	EET ROAD	97	14ED
BEI	BENJAMIN SCHMITZ		ORLANDO, FL. 3	2824	$^{ au}$ IUL 29	2013
7	Business address of organization	n (if different from mailing	g address shown above)	Number, street, and	d room or suite a	umber 🖒
		- ·	_		-JGDEN	
	City or town, state, and ZIP coo	le , , ,		<u>-</u>		UT
8	Type of report (check only one	DOX)				
	F		f Monthly repo	ort for the month of	· ` -	
а	First quarterly report (due b	y Aprıl 15)	(due by the		the month show	vn abovė, except the
	Second quarterly report (du	10 by 144 15	Dro electron	romant Introduction 1	245 au 1545 day 5	ofore the electrical
D	Second quarterly report (ac	e by July 13)		report (due by the 12	zuroi isuruay b	erore trie election)
	T	h. O-t-h 10	(1) Type of (
С	Third quarterly report (due	by October 15)	(2) Date of e			
			(3) For the s	tate of	 	
d	Year-end report (due by Ja	nuary 31)				
				•	by the 30th day	after general election)
e Mid-year report (Non-election		on	(1) Date of e	election		
	year only-due by July 31)		(2) For the s	tate of		
			····			2,866.30
9	Total amount of reported contributions (total from all attached Schedules A)				9	2,000.30
•						440.00
10	Total amount of reported exper	10	440.00			
	Under penalties of perjury 1 c	eclare that I have examined	this report including accomp	panying schedules and	statements and to t	he best of my knowledge
Sig	and belief it is true correct	and complete				
He		\times D			> 10/0	1 2.0
. 16	1 Non	<u>ver</u>		🛦 _	1/7/10	7017
	Signature of authorize	ed official		7 C	oate •	

For Paperwork Reduction Act Notice, see separate instructions

Cat No 30406G

Form **8872** (11-2002)

Name of organization	Schedule A page 1 of 1 Employer identification number		
RONWORKERS LOCAL UNION NO 808 Contributor's name, mailing address and ZIP code	Name of contributor's arreals as	91:2064183	
RONWORKERS LOCAL UNION 808	Name of contributor's employer IRONWORKERS	Amount of contribution	
200 E. KANDSTREET ROAD ORLANDO, FL. 32824	Contributor's occupation IRONWORKERS	\$ 1,300.3	
	Aggregate contributions year-to-date . ► \$	Date of contribution 4/10/2013	
Contributor's name, mailing address and ZIP code RONWORKERS LOCAL UNION 808	Name of contributor's employer IRONWORKERS	Amount of contribution	
200 E. KANDSTREET ROAD DRLANDO, FL. 32824	Contributor's occupation IRONWORKERS	\$ 860.8	
	Aggregate contributions year-to-date ▶ \$	Date of contribution 5/10/2013	
Contributor's name, mailing address and ZIP code RONWORKERS LOCAL UNION 808 200 E. KANDSTREET ROAD	Name of contributor's employer IRONWORKERS Contributor's occupation	Amount of contribution	
ORLANDO, FL. 32824	IRONWORKERS	\$ 705.0	
	Aggregate contributions year-to-date . ▶ \$	Date of contribution 6/7/2013	
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution	
	Contributor's occupation	\$	
	Aggregate contributions year-to-date > \$	Date of contribution	
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution	
	Contributor's occupation	\$	
	Aggregate contributions year-to-date	Date of contribution	
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution	
	Contributor's occupation	\$	
	Aggregate contributions year-to-date ► \$	Date of contribution	
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution	
	Contributor's occupation	\$	
	Aggregate contributions year-to-date ► \$	Date of contribution	
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution	
	Contributor's occupation	\$	
	Aggregate contributions year-to-date	Date of contribution	
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution	
	Contributor's occupation	\$	
	Aggregate contributions year-to-date	Date of contribution	

Schedule B Itemized Expenditures		Schedule B page 1 of 1
Name of organization IRONWORKERS LOCAL UNION NO 808		Employer identification number 91 2064183
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
FLORIDA AFL-CIO 135 SOUTH MONROE STREET	FLORIDA AFL CIO CK#1228	\$ 140.00
TALLAHASSEE, FL. 32301	Recipient's occupation	Date of expenditure
BRIAN DEMPSEY, SECRETARY/TREASURER	FLORIDA AFL CIO	5/17/2013
Purpose of expenditure		
MARCH AND APRIL.2013 DUE		
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
FLORIDA BLDG TRADES P.O. BOX 10888	FLORIDA BLDG TRADES CK#1229	\$ 300.00
TALLAHASSEE, FL. 32302	Recipient's occupation	Date of expenditure
	FLORIDA BLDG TRADES	5/17/2013
Purpose of expenditure		
MARCH- APRIL-MAY, 2013 CONTRIBUTION FO	OR EDUCATION	
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
	Recipient's occupation	\$ Date of expenditure
Purpose of expenditure	<u> </u>	
· · · · · · · · · · · · · · · · · · ·		
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
Recipient 3 name, maining address and 21 code	Hame of recipient's employer	Amount of expenditure
		\$
	Recipient's occupation	Date of expenditure
Durnoss of expenditure		
Purpose of expenditure		
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
Recipient S Hame, Haming address and Zir Gode	Name of recipient's employer	Amount of expenditure
		\$
	Recipient's occupation	Date of expenditure
Purpose of expenditure		
Talpose of experience		
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
	Recipient's occupation	\$ Date of expenditure
Purpose of expenditure	L	
Subtotal of expenditures reported on this page on	y Enter here and also include this amount in the to	140.00
line 10 of Form 8872		▶ \$ 440.00